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10945 U.S. PTO

Please type a plus sign (+) inside this box → +		PTO/SB/05 (11-00) Approved for use through 10/31/2002. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.																															
UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 50%;">Attorney Docket No.</td><td>4006.017</td></tr><tr><td>First Inventor</td><td>Ralph L. Barnett</td></tr><tr><td>Title</td><td>Zero Speed Indicating Devices and Processes for Testing Same</td></tr><tr><td>Express Mail Label No.</td><td>EL 759624929 US</td></tr></table>		Attorney Docket No.	4006.017	First Inventor	Ralph L. Barnett	Title	Zero Speed Indicating Devices and Processes for Testing Same	Express Mail Label No.	EL 759624929 US																						
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APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231																															
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Specification Sequence Listing on:<ul style="list-style-type: none">i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); orii. <input type="checkbox"/> paper</td></tr><tr><td style="vertical-align: top;">5. Oath or Declaration [Total Pages <u> </u>]<ul style="list-style-type: none">a. <input type="checkbox"/> Newly executed (original or copy)b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) <small>(for continuation/divisional with Box 18 completed)</small>i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small></td><td style="vertical-align: top;">c. <input type="checkbox"/> Statements verifying identity of above copies</td></tr><tr><td style="vertical-align: top;">6. <input type="checkbox"/> Application Data Sheet. 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18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <table style="width: 100%;"><tr><td style="width: 33%;"><input type="checkbox"/> Continuation</td><td style="width: 33%;"><input checked="" type="checkbox"/> Divisional</td><td style="width: 33%;"><input type="checkbox"/> Continuation-in-part (CIP)</td></tr></table> <p>Prior application information: Examiner <u>N. Favaz</u> Group Art Unit: <u>2856</u></p> <p>of prior application No. <u>09</u> / <u>165,717</u></p> <p>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>				<input type="checkbox"/> Continuation	<input checked="" type="checkbox"/> Divisional	<input type="checkbox"/> Continuation-in-part (CIP)																											
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19. CORRESPONDENCE ADDRESS <table style="width: 100%;"><tr><td style="width: 60%;"><input type="checkbox"/> Customer Number or Bar Code Label</td><td style="width: 40%; text-align: right;">or <input checked="" type="checkbox"/> Correspondence address below</td></tr></table> <div style="border: 1px solid black; padding: 5px; text-align: center; margin: 5px 0;"><small>(Insert Customer No. or Attach bar code's label here)</small></div>				<input type="checkbox"/> Customer Number or Bar Code Label	or <input checked="" type="checkbox"/> Correspondence address below																												
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<table style="width: 100%;"><tr><td style="width: 30%;">Name</td><td colspan="3">Jack Shore</td></tr><tr><td></td><td colspan="3">Hamman & Benn</td></tr><tr><td>Address</td><td colspan="3">10 South Lasalle Street #3300</td></tr><tr><td>City</td><td>Chicago</td><td>State</td><td>Illinois</td></tr><tr><td>Country</td><td>USA</td><td>Telephone</td><td>312-372-2920x230</td></tr><tr><td></td><td></td><td>Fax</td><td>312-372-7762</td></tr></table>				Name	Jack Shore				Hamman & Benn			Address	10 South Lasalle Street #3300			City	Chicago	State	Illinois	Country	USA	Telephone	312-372-2920x230			Fax	312-372-7762						
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FEE TRANSMITTAL
for FY 2002

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 454.00**Complete if Known**

Application Number	09/165,727
Filing Date	10/2/98
First Named Inventor	Ralph L. Barnett
Examiner Name	N. Fayaz
Group Art Unit	2856
Attorney Docket No.	4006.017

METHOD OF PAYMENT (check all that apply)☒ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None☒ Deposit Account:

Deposit Account Number 08-0425

Deposit Account Name

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Credit any overpayments
☒ Charge any additional fee(s) during the pendency of this application
☒ Charge fee(s) indicated below, except for the filing fee to the above identified deposit account.
FEE CALCULATION**1. BASIC FILING FEE**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
101	740	201	370	Utility filing fee	370.00
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	

SUBTOTAL (1) (\$) 370.00**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims	Independent Claims	Multiple Dependent	Extra Claims		Fee Paid
			below	Fee Paid	
10	5		20** = 2	42	84
			3** = 2	42	84

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) 454.00

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	920	217	460	Extension for reply within third month	
118	1,440	218	720	Extension for reply within fourth month	
128	1,960	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)**SUBMITTED BY**

Name (Print/Type) Jack Shore

Registration No. 17,551
(Attorney/Agent)**Complete (if applicable)**

Telephone 312.372.2920x105

Signature

Date 11/13/01

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